ATTORNE KET NO. 10002861-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of wh	nich is at	tached hereto unless t	he following box is c	hecked:
() was filed on Number			cation Serial No. or F	PCT International Application
including the claims, a	as amen		nt(s) referred to abo	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.
inventor(s) certificate listed	ty benefits below and	s under Title 35, United Sta	any foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate having a
COUNTRY	····	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES: NO:
				YES: NO:
Provisional Application I hereby claim the benefit to below:	ınder Title	35, United States Code Se	·	ed States provisional application(s) listed
	API	PLICATION SERIAL NUMBER	FILING DATE	
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Inventor's Signature

Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (a)

ATTORNEY	DOCKET	NO.	1000	2861	-1
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Full Name of # 2 joint inventor:	Bao-Sung Bruc Y h		Citizenship: US				
Residence:	4844 NW Bruno Place Corval	lis OR 9733	0				
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Inventor's Signature		Date					
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Residence:	2827 Windsar Place Albany C	OR 97321					
Post Office Address:	Same as residence						
Inventor's Signature		Date					
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Residence:	875 NW Ermine Place Corvall	is,Oregon 9	7330-3718				
Post Office Address:	Same as Residence						
Inventor's Signature		Date					
Full Name of # 5 joint inventor:			Citizenship:				
Residence:			_				
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 6 joint inventor:			Citizenship:				
Residence:							
Post Office Address:							
Inventor's Signature		Date					
Full Name of # 7 joint inventor:	·		Citizenship:				
Residence:							
Post Office Address:		·					
Inventor's Signature		Date					
Full Name of # 8 joint inventor:			Citizenship:				
Residence:							
Post Office Address:							
Inventor's Signature		Date					